## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10013820-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is equipted in the invention entitled:

	a patent is sought on the invention entitled:  Data Access In A Distributed Environment								
	the specification of which is attached hereto unless the following box is checked:								
	( ) was filed on as US Application No. or PCT International Application								
	Number and was amended on (if applicable).								
	I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.  Foreign Application(s) and/or Claim of Foreign Priority								
ļ.,i	I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any priority also identified below any priority also identified below any fave also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:								
	COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119				
				***************************************	YES: NO:				
					YES: NO:				
1	Provisional Application  I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:								
þii k			APPLICATION NUMBER	FILING DATE					
E TOTAL									
N.	U. S. Priority Claim								
å	I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insoder as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filling date of the prior application and the national or PCT international filling date of this application:								
	APPLICATION NUMBER		FILING DATE	STATUS (p.	atented/pending/abandoned)				
	POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney business in the Patent and Trademark Office connected therewing Customer Number 022879			and/or agent(s) to prose  Place Customer  Number Bar Code  Label here	cute this application and transact all				
	Send Correspondence to: HEWLETT-PACKARD CO	MDANY		Direct Telephon	e Calls To:				
	Intellectual Property Adm			James R. McDa	aniel				
	P.O. Box 272400 Fort Collins, Colorado 80527-2400			(208) 396-4095					
	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may leopardize the validity of the application or any patent issued thereon.  Full Name of Inventor: Gregory Eugene Perkins  Citizenship: US								
	Residence: 2471 N. Black Bear Way, Meridian, Idaho 83642 2800 Boyns Basin RV. HD-201								
			esidence	BO	De, ID 8370Z				
	Z/z//UZ								
	Inventor's Signature	/		Date					

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

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	Post Office Address:	Same as Hesidence		1 1			
	Inventor's Signature	) way	Date	2/21/2002			
	Full Name of # 4 joint invento	or:		Citizenship:			
	Residence:						
(1) U1	Post Office Address:						
	Inventor's Signature		Date				
c)	Full Name of # 5 joint invento	or:		Citizenship:			
ħ.	Residence:						
f),	Post Office Address:						
	Inventor's Signature		Date	*A			
	Full Name of # 6 joint invento	or:		Citizenship:			
	Residence:	*****					
	Post Office Address:						
	Inventor's Signature		Date	****			
	Full Name of # 7 joint inventor	or:		Citizenship:			
	Residence:						
	Post Office Address:						
	Inventor's Signature		Date				
	Full Name of # 8 joint invento	or:		Citizenship:			
	Residence:						
	Post Office Address:						
	Inventor's Signature		Date				